PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSEE FEE

Mail Stop ISSEE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| naintenance fee notificat | ions. | nerwise in Block I, by (a | specifying a new o | • | | | can only be used for | | | |
|---|--|--|--|---------------------|--|---------------------|--|---|-----------------------------------|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | | Transmittal. This Each additional | certifi paper, | cate cannot be used for such as an assignmenting or transmission. | or any other accord nt or formal drawi | npanying ng, must | |
| 23117 | 7590 04/20 | /2007 | E | nave | | | | | | |
| NIXON & VANDERHYE, PC | | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United | | | | | |
| | EBE ROAD, 11TH | | 18 | State | s Postal Service w | ith suff Ston I | icient postage for firs SSUE FEE address) 273-2885, on the d | it class mail in an a | envelope facsimile | |
| ARLINGTON, V | | JUL 1 | 3 2007 | trans | mitted to the USPT | O (57 i |) 273-2885, on the d | ate indicated below | ν. | |
| 7/16/2007 SFELEKE2 | 00000092 09960728 | 00 OP 00 OP 00 OP | 8 / | | | | | (Deposi | tor's name) | |
| 1 FC:1501 1400.00 OP 300.00 OP 15.00 OP 15.00 OP | | | 40 FMAN ST | | (Signature) | | | | | |
| 3 FC:8001 APPLICATION NO. | FILING DATE | | FIRST NAMED INVEN | NTOR | T | ATTOR | RNEY DOCKET NO. | CONFIRMATION NO. | | |
| 09/960,728 | 09/24/2001 | Dominic Hugo Symes | | | 550-258 4210 | | | لــــــــــــــــــــــــــــــــــــــ | | |
| , | | PLE DATA (SIMD) PROCESSING METHOD AND | | | | | | | | |
| THE OF INVENTION. | . IMPROVED SINGLE | INSTRUCTION MULTI | FLE DATA (SIMD) | rkoc | ESSING WETHO | DAND | AFFARATUS | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE | DUE | PREV. PAID ISSUE | FEE | TOTAL FEE(S) DUE | DATE DU | JE J | |
| nonprovisional | sional NO \$1400 | | \$300 | | \$0 | | \$1700 | 07/20/2007 | | |
| EXAMINER | | ART UNIT | CLASS-SUBCLAS | | •• | | 4. 100 | 0,720,20 | | |
| HUISMAN | | 2183 | 712-223000 | | | | | | | |
| | ence address or indication | | | the na | itent front page, lis | | | | | |
| CFR 1.363). | | | (1) the names of | up to | 3 registered patent | | eys I <u>NIXON</u> | & VANDERHY | E P.C | |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 | | | | | | | |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | ND RESIDENCE DATA | A TO BE PRINTED ON | | | | | | | | |
| | | ified below, no assignee pletion of this form is NO | • | | | e is ide | entified below, the d | ocument has been | filed for | |
| (A) NAME OF ASSIC | | RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | |
| ARM Limite | Cambridge, United Kingdom | | | | | | | | | |
| N - 1 - 1 - 1 | | | | | X) a | | | П а | | |
| lease check the appropri | iate assignee category or | categories (will not be pr | rinted on the patent): | | Individual 🖴 Co | rporatio | on or other private gr | oup entity Gov | rernment | |
| | | | | | se first reapply an | y previ | iously paid issue fee | shown above) | | |
| Issue Fee | A check is enclosed. | | | | | | | | | |
| Publication Fee (N Advance Order - # | ☐ Payment by credit card. Form PTO-2038 is attached. (\$1715.00) ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form). | | | | | | | | | |
| Advance Order - 4 | of Copies | | overpayment, to | Depos | it Account Numbe | r 14 | -1140 (enclose a | n extra copy of this | s form). | |
| | tus (from status indicated | / 1' | | | | | | | | |
| • • • | s SMALL ENTITY state | | | | | | TTY status. See 37 C | | | |
| NOTE: The Issue Fee and nterest as shown by the r | d Publication Fee (if req records of the United St | uited) will not be accepte es Priep and Trademark | d from anyone other to Office. | than th | e applicant; a regis | tered a | ttorney or agent; or t | ne assignee or othe | r party in | |
| Authorized Signature | | Mora | | | DateJı | ıly | 13, 2007 | | | |
| Typed or printed name | | Registration No. 27, 393 | | | | | | | | |
| This collection of information application. Confident | ation is required by 37 Ctiality is governed by 35 | CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary | on is required to obtain 1.14. This collection depending upon the | in or re is esti | etain a benefit by the mated to take 12 n | ne publi ninutes | ic which is to file (an to complete, including on the amount of ti | d by the USPTO to | process) ring, and complete | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.